

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		10-05-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A.S.	993	6-15-1
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	1/4/02
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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